

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1337201

OMB APPROVAL						
OMB Number: 3235-0076						
Expires:	Apri	130,2008				
Expires: April 30,2008 Estimated average burden						
hours per response1600						

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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Kenneland West, L.P. \$1,400,000 Limited Partnership Interests Offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing: New Filing Amendment	
A, BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	05062912
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	· · · ·
Kenneland West, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2550 West Beilfort, Houston, Texas 77054	(713) 662-2119
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
The design, development, construction, leasing and maintenance of a pet kennel.	PROCESSED
Type of Business Organization	
□ corporation ☑ limited partnership, already formed □ other (g □ business trust □ limited partnership, to be formed	hease specify): ALG 29 2005
Month Year Actual or Estimated Date of Incorporation or Organization: 0 8 0 5 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS	

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required; A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Stephen N. Smith Business or Residence Address (Number and Street, City, State, Zip Code) 5113 Valerie Street, Bellaire, Texas 77401 Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		444 F			B. I	NFORMAT	ION ABOU	T OFFERI	NG	1.5		(#.1455) (245)	64.17 E
1. F	lac the	icener cold	or does th	e iccuer ir	atend to se	II to non-a	coredited i	nuestors ir	this offer	ina?		Yes	No
1. 1	ras tire	133401 3014	, or does th			n, to non-a Appendix				•	***************************************	×	
2. V									***************	_{\$} 35,	000.00		
										Yes	No		
		e offering p										×	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full N	Vame (I	ast name f	îrst, if indi	vidual)		- 							
Busin	ess or l	Residence /	Address (N	umber and	Street, C	ity, State, Z	Cip Code)			· · · · · ·			
Name	of Ass	ociated Bro	oker or Dea	aler									
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				·		
(Check '	'All States'	or check	individual	States)	***************************************		***************************************	******************			☐ Al	l States
[.	AL	AK	AZ	AR	CA	[CO]	CT	DE	DC	FL	GA	HI	ID
-	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA
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Full N	Vame (I	ast name f	irst, if indi	vidual)									
Busin	ess or	Residence	Address (N	lumber an	d Street, C	City, State,	Zip Code)						
Name	of Ass	ociated Bro	oker or Dea	aler									
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		ich Person 'All States'										- Δ1	l States
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_	MT	NE	NV	NH	KY NJ	NM	NY	MD NC	ND	OH	MN OK	OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full N	Vame (I	ast name f	īrst, if indi	vidual)									
Busin	ess or	Residence	Address (N	Jumber an	d Street, C	ity, State, 2	Zip Code)						
Name	of Ass	ociated Bro	oker or Dea	ıler									
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check '	'All States'	or check	individual	States)	••••		•••••	••••••••••			☐ AI	States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID See
_	IL MT	NE NE	[A]	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
_	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	
	Equity	\$	\$_0.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$ 1,400,000.00	\$_1,400,000.00
	Other (Specify)	\$	\$
	Total	\$_1,400,000.00	\$_1,400,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	15	s 1,295,000.00
	Non-accredited Investors		s 105,000.00
	Total (for filings under Rule 504 only)		\$ 1,400,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T. COM.	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$ \$ 0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ <u>0.00</u>
	Legal Fees		\$_20,000.00
	Accounting Fees		\$ 5,000.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)	_	\$ 0.00
	Other Expenses (identify)		\$ 0.00
	Total		\$ 25,000.00

27-6	C. OFFERING PRICE, NUM	iber of investors, expenses and use of p	ROCEEDS	
	and total expenses furnished in response to Part C -	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		1,375,000.00 \$
5.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross rt C — Question 4.b above.		
			Payments to	
			Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[
	Purchase of real estate	[\$ 1,090,000.00
	Purchase, rental or leasing and installation of ma	achinery [¬ s	CO.0 0.00
	Construction or leasing of plant buildings and fa	cilities	」『 ┐《	285,000.00
	Acquisition of other businesses (including the va	•		. D
	offering that may be used in exchange for the ass		¬ ¢	☑ \$_0.00
	Other (specify): Contingency	[\$	✓ \$ 0.00
			\$	
	Column Totals		\$_0.00	[] \$_1,375,000.00
	Total Payments Listed (column totals added)		\$ <u></u> 1,	375,000.00
		D: FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issuer to fu	ne undersigned duly authorized person. If this notice urnish to the U.S. Securities and Exchange Commis credited investor pursuant to paragraph (b)(2) of F	sion, upon writte	
Iss	uer (Print or Type)	Signature	Date	
Κe	enneland West, L.P.	SI XIIII	August 9, 2005	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
(er	nneland West GP, Inc., By: Stephen N. Smith	President		

- ATTENTION -----

, 30°57 138	E. STATE SIGNATURE	in and the	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Kenneland West, L.P.	August 9, 2005
Name (Print or Type)	Title (Print or Type)
Kenneland West GP, Inc., By: Stephen N. Smith	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX		and the second		
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Finvestor and rchased in State C-Item 2)		Disqual under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
СТ									
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
МЕ									
MD									
MA									
MI									
MN									
MS									

APPENDIX 2 3 4 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No **Investors** Amount Investors Amount Yes No MO MT NE NV NH NJ NM NY NC ND OH OK OR PΑ RI SCSD TNX TXLtd Partnership 15 2 \$105,000.00 \$1,295,000. × UT VT VAWA WV WI

	eragest.	***		APP	ENDIX	11 pa				
1	Intend to non-a investor	I to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
PR										

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